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ABSTRACT

This paper addresses the issue of non-prescription drug commercials appearing on commercial television and the impact that they have on children. Self-regulatory standards set by the National Association of Broadcasters are cited, and research concerning children and drug commercials is discussed. A brief bibliography is attached. (RAC)

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The Effects of Televised Drug Commercials On Children

By

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The average American child watches 25-30 hours of television each week. He views an estimated 20,000 commercial ads each year. Of these, it is thought that 1,000 are for non-prescription medications. How are these drug advertisements affecting American children? Are children actually influenced by television advertising, and if so, are we developing "to be" hypocondriacs?

Children are more susceptible to television commercial advertising than are adults. They lack the logical capacity to understand the sophisticated messages of Madison Avenue. Under the age of 5, they have very little, if any, comprehension of the selling intent of commercials. Under the age of 12, they lack the experience and maturity, to judge possible dangers or long term effects, needed to discern non-prescription drug ads. The younger the child, the more easily he or she is persuaded by a television commercial, and the more belief and trust the child has in that commercial. Furthermore, most television drug commercials are paced, meaning that they are distinctly set apart from the program. This serves to direct attention to the commercial and may actually increase the child's attention level.

Most social scientists consider television to play an important role in the child's formation of values. If this is true, are the many non-prescription drug commercials aired each day affecting our young children? In 1975, 19 states had their Attorney General petition the Federal Communications

Commission to prohibit televised non-prescription drug advertising between 6 a.m. and 9 p.m. each day. In support of this move, the Council on Children, Media, and Merchandising, an active consumerist public interest organization, also filed a request to ban drug advertising.

The non-profit trade association of the over-the-counter drug industry, the Proprietary Association, rebelled. They contended that neither medical nor scientific evidence connects non-prescription drug advertising with the misuse, overuse, or abuse of drugs. The Federal Communications Commission rejected the petitions to consider the banning of medicine advertising on television.

There are however, some guidelines presently in effect concerning television drug advertising during "children's" viewing hours, Saturday and Sunday mornings. The National Association of Broadcasters has adapted a self-regulatory set of standards concerning advertising directed at children. One such standard of this group is to restrict the advertising of drugs on programs geared primarily to children age 12 and under. As of 1976, 415 of the 711 licensed commercial television stations were subscribers to the National Association of Broadcasters Code.

Provisions of the National Advertising Division of the Council of Better Business Bureaus (Children's Advertising Guidelines) also advises that non-prescription drugs should not be advertised to children. This guideline pertains to television shows in which the watching audience is primarily under the age of 11, or where children compose 50 percent of the audience.

Both of the mentioned guidelines pertain to "children's" television. Nevertheless, children are likely to be watching television at times other than Saturday and Sunday mornings. Only 16 percent of children's television viewing occurs during children's programing. Late afternoon and early evening are the most popular viewing times for children. However, from 9 p.m. to 11 p.m. approximately 17 million 6 to 11 year olds and 8 million 2 to 5 year olds watch television.

Little actual research concerning young children and drug commercials is available. The majority of the research concerning drug advertising is associated with teenagers, and/or the use of illicit drugs. However, three of the most notable research efforts concerning children and drug advertising are mentioned below.

A study by Lewis and Lewis (1974) of 208 fifth and sixth grade children suggested that the overwhelming majority of these children trust non-prescription drug commercials. Kanter (1970) reported that the advertising of medications influenced the attitudes of fifth, seventh and eleventh grade children toward medicine. The younger children were the most susceptible to the ideas presented in the commercials.

Certainly the most far reaching of these studies was done in 1975 by Atkin. He investigated the relationship between exposure to drug advertising and attitudes toward medicine in 256 school children. Atkin found that a child's heavy exposure to drug advertisements lead to the following perceptions: that people are more frequently sick and more frequently take medicine; a belief in the quickness of relief after taking

medicine; and a greater feeling of recovery or feeling better after taking medicine.

Such studies, as the three cited above, are persuasive; however there are not enough studies for conclusive evidence. Further investigation of the effects of televised drug advertising on children is necessary and the possibility exists that there may be pro-social effects derived from children's viewing of drug commercials. Knowledge of medications as well as uses for medications may be learned. Negative effects such as a greater frequency of illness perception may also exist. Not until further studies are initiated and completed can the question of "What are the effects of televised drug commercials on children?" be answered.

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